Environmental Management Consolidated Business Center (EMCBC)

Subject: Preparation, Review, Approval, Revision, and Distribution of EMCBC Controlled Documents

Implementing Procedure

APPROVED: ***(Signature on File)***
EMCBC Director
ISSUED BY: Office of the Director

1.0 PURPOSE

The purpose of this procedure is to establish responsibilities and provide a uniform method for the preparation, review, approval, revision, and distribution of Environmental Management Consolidated Business Center (EMCBC) controlled documents.

2.0 SCOPE

The scope of this procedure is to provide a systematic approach to prepare, review, approve, revise, and distribute EMCBC controlled documents.

3.0 APPLICABILITY

All EMCBC Staff shall comply with this procedure. Service Level Agreement (SLA) sites staff have the option of choosing to adopt this procedure or develop their own procedure.

4.0 REQUIREMENTS

4.1 Requirements:

4.1.1 10 CFR 830.120(C) (1) (IV) – Documents and Records

4.1.2 DOE O 200.1, Information Management Program

4.1.3 DOE O 243.1 – Records Management Program

4.1.4 DOE O 251.1-1B, Departmental Directives Program

4.1.5 DOE O 414.1C, Criterion 4 – Documents and Records

4.1.6 DOE M 251.1-1A, Directives Systems Manual

4.1.7 DOE G 242.1-1, DOE Forms Management Guide

4.1.8 ASME Nuclear Quality Assurance (NQA)-1, Requirements 5 - Instructions, Procedures, and Drawings, Requirement 6 – Document Control, and Requirement 17 – Quality Assurance Records

5.0 DEFINITIONS

5.1 Controlled Document: A document that is prepared, reviewed, formally approved in accordance with established implementing documents, maintained, updated and subject to a defined change process. In particular, these documents are identified as Policy Statements, Program Descriptions, Plans, Implementing Procedures, Forms and Departmental Technical Instructions. An approved controlled document describes how an activity is to be performed and the responsibility of those personnel required to perform the activity. The document may include methods, equipment, materials to be used, and the sequence of operations to complete the activity.

5.2 Line-Management – The organizational chain of command that is responsible for carrying out DOE-EMCBC policies and procedures. Line management flows from the Director through the Assistant Directors to the entire DOE-EMCBC staff.

NOTE: As used within the controlled documents, the words **shall/will/must** is used to denote a requirement, and in that context, they are generally identified with a quality assurance or safety requirement document. The word **should** denote a recommendation and the word **may** denote permission.

6.0 RESPONSIBILITIES

6.1 EMCBC Director - will review, approve and sign all EMCBC policies, procedures, and program description documents. A designee may be appointed by the Director.

6.2 EMCBC Assistant Directors – shall verify that complete, accurate, and current policies, procedures, plans, and program descriptions are developed, as appropriate, for implementation of the EMCBC's mission, goals, and responsibilities, including the need for procedures and the assignment of Cognizant Authors or Subject Matter Experts, and shall determine EMCBC staff training needs related to new or revised controlled documents. If a departmental variance should occur to a procedure, the department will have to define how they perform their process in a Technical Instruction (TI). See also section 8.3.8 and Attachment D.

6.3 EMCBC Subject Matter Expert (SME) – is responsible for controlled document development; flowcharting the document process, coordination of the review process; comment resolution; reviewing documents under their cognizance to ensure documents are maintained up-to-date and reflect current requirements and policies; and assignment of the appropriate reviewers.

6.4 EMCBC Controlled Document Coordinator (CDC) – is located within the Office of the Director and is responsible for managing the EMCBC Controlled Document Program; notifies the Cognizant Author or SME of their 2 year evaluation/revision date; reviews all controlled documents for quality control prior to distribution; prepares the management approval packet, which includes a copy of the final Controlled Document, and a copy of the Document Review Record with reviewer comments; and assigns a numeric code for all new controlled documents. Forms developed as a result of this and other controlled documents will be controlled by the

CDC. The forms will have the series identifier, controlled document number, form number in sequential order, and revision number of the form. The CDC is responsible for maintaining hard copies of all EMCBC Controlled Documents and maintains records generated through review process and approval of Controlled Documents. The CDC also maintains, in native format, the electronic files of the final versions of each controlled document and is responsible for ensuring that the EMCBC Services Intranet Page displays the correct version.

6.5 All EMCBC Staff – are responsible for review and compliance with established controlled documents.

7.0 GENERAL INFORMATION

7.1 A determination of the need to develop, review or cancel a controlled document exists when the following criteria are met:

7.1.1 Development of a Controlled Document:

- DOE, federal, state, local laws, regulatory requirements, management's desire for a "best practice" etc., stipulate that a program be developed or changed and there is no existing document describing such actions.

7.1.2 Revisions of an existing controlled document:

- not consistent with reference requirements;
- has been determined to be technically incorrect;
- another related controlled document is revised and accuracy is affected;
- new requirements have been accepted which require additional documentation;
- changes to existing requirements have been accepted which required changes to existing controlled document; and
- improvement to the controlled document or process.

7.1.3 Cancellation of an existing controlled document:

- when the controlled document is superseded.
- when the need for the controlled document ceases.

7.2 All EMCBC controlled documents are considered in effect when approved by the EMCBC Director or designee.

7.3 It is not anticipated that the EMCBC will maintain controlled document stations; therefore, to ensure the most recent version of a controlled document is being used, the user should access the electronic version of the controlled document, available from the EMCBC Services Intranet Page under Policies, Procedures, and Plans.

8.0 PROCEDURE

8.1 Determining the Need for a Controlled Document

The EMCBC Assistant Directors shall be responsible for determining the need for a controlled document based on the guidance provided in Section 7. The assigned EMCBC SME will develop the controlled document.

8.2 Document Formats

Controlled Documents shall be prepared using the format in Attachments A, B, C, and D. A template of the format is located on the K: /drive/All Users/Forms/ Templates for Controlled Documents.

8.3 Assembly of New/Revised Documents

8.3.1 Document Identifiers

The SME shall determine the document alpha identifiers (types i.e, Policy, Implementing Procedure, Plan, Technical Instruction, etc.). The CDC shall determine the identification series number and sequential identification numbers by complying with DOE M 251.1A – Directive System Manual, (Req. 4.1.6).

8.3.2 Document Preparation

8.3.2.1. The SME shall prepare the draft controlled document in accordance with format, document layout, and content requirements specified in Attachments A, B, C, and D.

8.3.2.2. The SME will obtain electronic copies of all blank templates from the K: /drive/All Users/Forms/Template for Controlled Documents.

8.3.3 Document Review, Approval, and Comment Process

8.3.3.1. The draft controlled document will be transmitted from the SME to the cognizant EMCBC Assistant Director or other reviewer within the department for initial review and comment. The controlled document will then return to the SME for resolution of comments.

CDC shall review documents for compliance with this procedure and the SME shall resolve any comments prior to circulation/ review by any other reviewers.

8.3.3.2. Controlled documents shall be reviewed for adequacy, correctness and completeness. All Assistant Directors shall be deemed reviewers and included on the Document Review Record Sheet,

IP-251-01-F3 (Attachment G). All reviewers shall ensure that the document represents applicable requirements accurately, the current organization responsibilities are up-to-date, the technical content is free of error, and the instructions are presented clearly to reduce and eliminate misunderstanding. The Assistant Director may delegate the review of a document to their Team Leaders or organizational SME.

8.3.3.3 The reviewer shall annotate all comments on the Document Review Record Sheet, IP-251-01-F3, (Attachment G) or attach the written comments with the review form. Electronic responses shall be printed and maintained as part of the document control process.

8.3.3.4 Once review is complete, reviewer shall annotate the applicable concurrence block for their review and initial and date.

8.3.3.5 Reviewer shall then forward review package to the SME for comment resolution.

8.3.3.6 The review and concurrence period should be limited to ten working days.

8.3.4 Resolution and Incorporation of Comments

8.3.4.1 The SME shall resolve reviewer comments and complete the Record of Revision IP-251-01-F1, (Attachment E).

8.3.4.2 The SME shall reroute affected pages to the impacted reviewers.

NOTE: If comments cannot be resolved between the reviewer and the author, comment resolution will be handled by the appropriate EMCBC Assistant Director. In the unlikely situation where comments cannot be resolved by the Assistant Directors, the final resolution will be made by the EMCBC Director.

8.3.5 Final Approval and Processing

8.3.5.1 Once all comments have been incorporated and all reviewer non-concurrences have been resolved and signed off on the Document Review Record Sheet IP-251-01-F3, (Attachment G) the controlled document shall be provided electronically in Word Format to the EMCBC CDC for review, and assembly of a complete package for the Director's review and approval. A complete package shall contain:

A. The signed document;

B. All Document Review Record Sheets (IP-251-01-F3, Attachment G) with initials and dates indicating concurrence or concurrence with comments.

C. A completed Record of Revision (IP-251-01-F1, Attachment E) indicating what and where all changes were made.

8.3.5.2 Upon approval by the Director, the controlled document shall be submitted to the CDC for distribution. The CDC shall maintain all original records, which include comments generated for final development. All records will be kept in accordance with the Directors Office File Plan.

8.3.6 Revision or Cancellation

8.3.6.1 Revision of a controlled document shall be accomplished by issuing the Controlled Document Change Request, IP-251-01-F2, (Attachment F) with the word “REVISE PROCEDURE” noted in the Proposed Revision. The dates, initiator, initiators phone number, title of the document and the unique identifier shall also be completed. The body of the form shall contain the justification for revision of the controlled document. When revising a controlled document, the entire controlled document shall be reissued with each page identified with the new revision number. Individual page changes may be made. If a change has been made to the document, place a change bar next to the paragraph where the change occurred. If page changes are deemed necessary, roll all page changes up under one revision once a year.

8.3.6.2 Cancellation of a controlled document shall be accomplished by issuing the Controlled Document Change Request, IP-251-01-F2, (Attachment F) with the word “DELETE PROCEDURE” noted in the Proposed Revision. The dates, initiator, initiators phone number, title of the document and the unique identifier shall also be completed. The body of the form shall contain the justification for deletion of the controlled document. The Document Review Record Sheet, IP-251-01-F3 (Attachment G) must also accompany the Controlled Document Change Request (Attachment F). Concurrences by the Assistant Directors are also required to cancel a controlled document.

8.3.7 Periodic Reviews

8.3.7.1 Controlled documents shall be evaluated every 2 years to ensure the document is current and effective. This evaluation shall be conducted and documented by the responsible cognizant Author or SME. The EMCBC CDC also coordinates with applicable SME to ensure timely review of controlled documents.

8.3.7.2 An EMCBC Assessment Team may conduct periodic assessments of controlled documents to evaluate compliance with the applicable requirements of DOE O 414.1C (Requirement 4.1.5). A record of Document Reviews shall be placed in the document development file.

8.3.8 Technical Instructions (TI)

These instructions provide a mechanism of documenting standard departmental functions that will need to be followed in a consistent manner.

The scope and applicability of a TI are strictly limited to the technical functions in the department under which it is developed. A TI shall not contradict any EMCBC Controlled Document.

Each department that issues TI's will follow the instructions below at (8.3.8.1). Control and issuance of all controlled documents shall be handled by the CDC, not individual departments for TI's.

8.3.8.1 Developing Technical Instructions

8.3.8.1.1 Each TI will follow the format of Attachment (D).

8.3.8.1.2 Each TI will be reviewed by the author and one other SME within the issuing department. Once this peer review is completed the TI will be submitted to the cognizant AD for approval.

8.3.8.1.3 It is the responsibility of each reviewer and approver to ensure that the TI is consistent with all existing EMCBC Controlled Documents and that the scope is strictly limited to the issuing department.

8.3.8.1.4 The final TI will be forwarded to the CDC for inclusion to the master procedure under Section 9 Records Maintenance. The CDC will control the document and keep the record copy of the TI with the procedure.

8.3.9 Flowcharting Instructions

8.3.9.1 All EMCBC Implementing Procedures and Technical Instructions shall contain a flow chart to aid in the understanding of the process. See Attachment B, Section 12 for Guidance for Incorporating Flowcharts into EMCBC Controlled Documents.

9.0 RECORDS MAINTENANCE

9.1 Records generated as a result of implementing this document are identified as follows:

9.1.1 IP-251-01-F1, EMCBC Record of Revision

9.1.2 IP-251-01-F2, EMCBC Controlled Document Change Request

9.1.3 IP-251-01-F3, EMCBC Document Review Record Sheet

9.1.4 Copy of new/revised Controlled Document

10.0 FORMS USED

10.1 Forms used shall be the latest revision unless otherwise specified.

10.1.1 IP-251-01-F1, EMCBC Record of Revision

10.1.2 IP-251-01-F2, EMCBC Controlled Document Change Request

10.1.3 IP-251-01-F3, EMCBC Document Review Record Sheet

11.0 ATTACHMENTS

11.1 Attachment A – EMCBC Policy Statement Format

11.2 Attachment B – EMCBC Implementation Procedures Format

11.3 Attachment C – EMCBC Plans and/or Program Description Format

11.4 Attachment D – Technical Instruction Format

11.5 Attachment E - IP-251-01-F1, EMCBC Record of Revision

11.6 Attachment F - IP-251-01-F2, EMCBC Controlled Document Change Request

11.7 Attachment G - IP-251-01-F3, EMCBC Document Review Record Sheet

Attachment A

DOE-EMCBC POLICY STATEMENT FORMAT

1.0 POLICY

Develop a "POLICY" statement that is a comprehensive description of a course of action to be followed to meet stated objectives, DOE Orders and Directives, or government regulations.

2.0 SCOPE (Optional)

Include a statement of purpose establishing the limitations or parameters of the policy, what it applies to, that is, receipt of incoming material, excess capital equipment, vendor drawings, etc.

3.0 APPLICABILITY

Determine who shall comply with said policy statement.

4.0 REQUIREMENTS & REFERENCES (Optional)

4.1 Requirements

Identify and list requirements (drivers) such as DOE, federal, state, and local codes, rules, regulations, and laws, etc., that apply to implementation of the policy. Include document number and title.

4.2 References

Identify and list reference documents that have been mentioned in the procedure. Include document number and title.

5.0 DEFINITIONS & ACRONYMS (Optional)

Identify those terms and statements contained in the policy that require definition for uniform interpretation and clarity. Include any acronyms or abbreviations that are specific in the policy. If this section is not required, then state "Not Applicable".

6.0 RESPONSIBILITIES (Optional)

Identify the managerial position or function (not the name of the individual) responsible for taking action; and where appropriate, groups associated with the responsibility to execute the appropriate policy requirements contained therein.

7.0 GENERAL INFORMATION or IMPLEMENTATION REQUIREMENTS (Optional)

7.1 General Information – Include supplementary background information associated with the orderly implementation of this policy. This section will NOT always be required; however, where appropriate, this section shall be a normal extension of the Policy statement and may include general responsibilities, for example, that are not specific to a position or group of employees.

7.2 Implementation Requirements – This section may be used when the document identifies specific criteria that must be included in the department's policy to correctly implement the requirements of the policy.

8.0 PROCESS – Not utilized for a Policy.

9.0 FLOWCHART – Not utilized for a Policy.

Attachment B

DOE-EMCBC IMPLEMENTATION PROCEDURES
FORMAT

1.0 PURPOSE

Develop a "PURPOSE" statement (depends upon the document level) that is a comprehensive description of a course of action to be followed to meet stated objectives, corporate policies, DOE Orders and Directives, or government regulations.

2.0 SCOPE

Include a statement of purpose establishing the limitations or parameters of the procedure, what it applies to, that is, receipt of incoming material, excess capital equipment, vendor drawings, etc.

3.0 APPLIBILITY

Determine who shall comply with said procedures.

4.0 REQUIREMENTS & REFERENCES

4.1 Requirements

Identify and list requirements (drivers) such as DOE, federal, state, and local codes, rules, regulations, and laws, etc., that apply to implementation of the procedure. Include document number and title.

4.2 References

Identify and list reference documents that have been mentioned in the procedure. Include document number and title.

5.0 DEFINITIONS & ACRONYMS (Optional)

Identify those terms and statements contained in the procedure that require definition for uniform interpretation and clarity. Include any acronyms or abbreviations that are specific in the procedure. If this section is not required, then state "Not Applicable".

6.0 RESPONSIBILITIES

Identify the managerial position or function (not the name of the individual) responsible for taking action; and where appropriate, groups associated with the responsibility to execute the appropriate procedural requirements contained therein.

7.0 GENERAL INFORMATION (Optional)

Include supplementary background information associated with the orderly implementation of this policy or procedure. This section will NOT always be required; however, where appropriate, this section shall be a normal extension of the Policy or Purpose statement and may include general responsibilities, for example, that are not specific to a position or group of employees. If this section is not required, then state "Not Applicable" in this section.

8.0 PROCEDURE

This section is an orderly, step-by-step, and logical description of instructions detailing the actions and requirements needed to complete the procedure. Clearly identify the action parties involved and emphasize continuity where performances of sequential actions are necessary to achieve the required results.

NOTE – It is appropriate to include a flow chart, providing the user with a clear picture of the process steps necessary to effectively and accurately complete the required activities. See Section 12 of this attachment.

9.0 RECORDS MAINTENANCE

The following is an example of a Records Maintenance section. This information shall appear in each Records Maintenance section. Additional information may be included to further clarify the Records Maintenance section.

EXAMPLE:

9.1 Records generated as a result of implementing this document are identified as follows, and are maintained by the Office of the Director, in accordance with that office Organizational File Plan:

9.1.1 "Insert Document Title" and "Document Number," if applicable.

9.1.2 "Insert Document Title: and "Document Number," if applicable.

OR

9.0 RECORDS MAINTENANCE

No records are generated as a result of implementing this document.

10.0 FORMS USED

This section shall list all forms used *(both Internal and External)* in the procedure. The correct and complete form title and assigned form series number assigned by the EMCBC Controlled Document Coordinator shall be included. The words "latest revision" shall either be included after the form reference OR a general statement, "all forms are the latest revision unless otherwise specified" shall be included in the section. Forms that are used as an example in the procedure shall have the word (example) placed after the form series number. Forms that exist in another procedure, but have been referenced shall be labeled with the following statement:

SEE _____
FOR LATEST REVISION

11.0 ATTACHMENTS

All attachment shall be listed in this section and shall contain the unique designator numbers and titles. Each attachment shall be alphabetically labeled starting with A, B, C, etc., in consecutive order.

12.0 FLOWCHART

12.1 Guidance for Incorporating Flowcharts into EMCBC Procedures

12.1.1 A flowchart is included in an implementing procedure to aid in the understanding of the process.

12.1.2 The flowchart is not a substitute for the procedure body, which provides the detailed instructions necessary for performance of the activity.

12.1.3 Use a second, more detailed, flowchart if needed to describe sub-processes.

12.1.4 Use of standard symbols is necessary to ensure understanding across the organization.

12.1.5 Use of standard software tools and file formats is necessary to minimize resources needed to develop, distribute and maintain the flowcharts.

12.1.6 EMCBC will use Microsoft Office PowerPoint as the standard tool for development of flowcharts for EMCBC Implementing Procedures.

12.1.7 IRM will provide training as needed on use of PowerPoint for flowcharts.

12.1.8 Create a separate file for each flowchart.

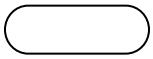
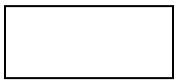
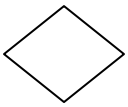
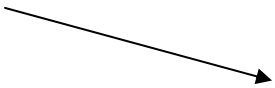
12.1.9 When ready for review, save each flowchart to .TIF image and incorporate the .TIF into the Word file in the appropriate position.

12.1.10 Provide the EMCBC IP Coordinator with the final PowerPoint electronic file along with the electronic Word file to facilitate updates and revisions.

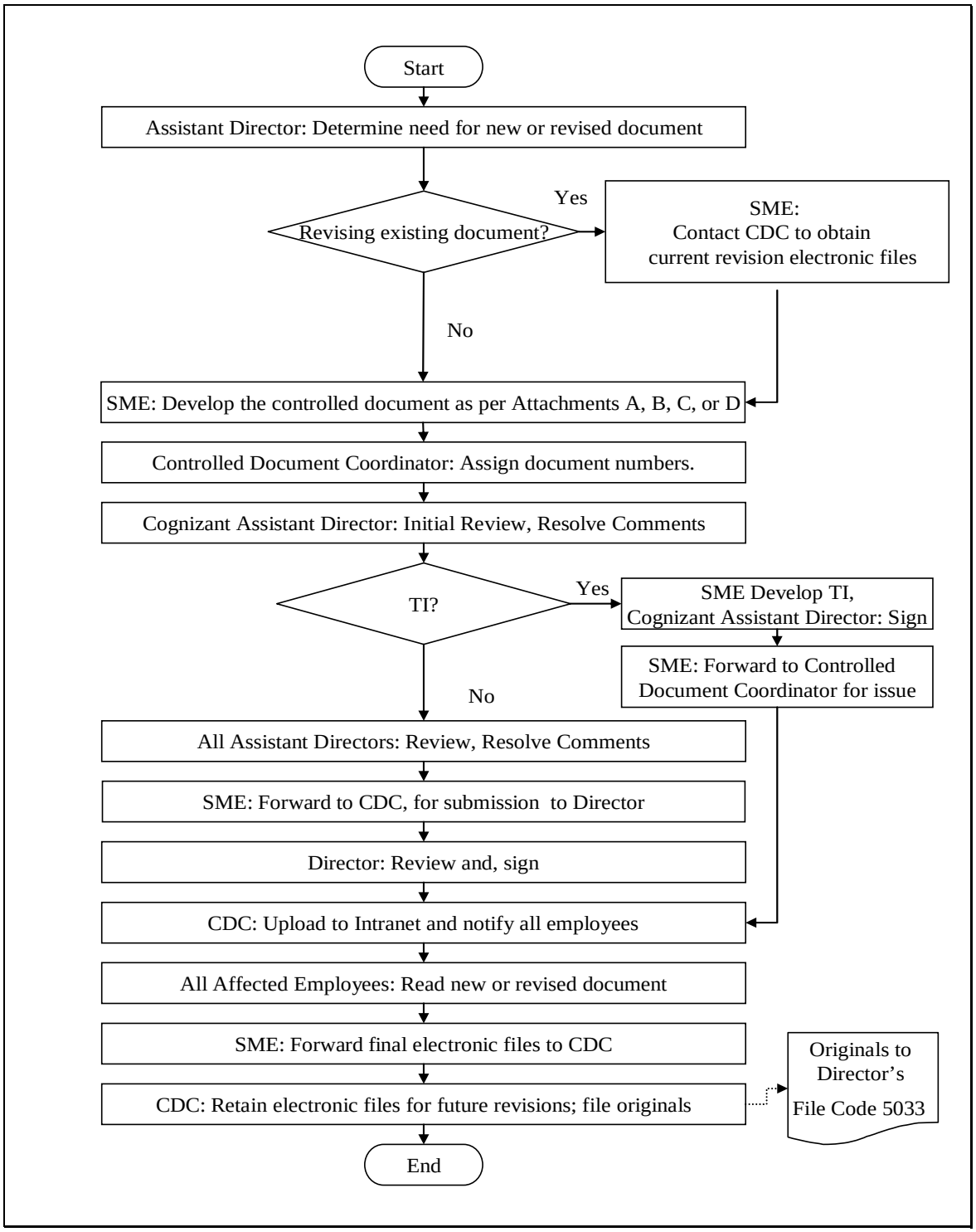
12.1.11 Existing flowcharts developed in Visio may also be used but must be converted to .TIF images before being included in the main Word document.

12.1.12 Include summary of action and responsible role in the text of the flowchart symbols.

12.2 Below are standard symbols to use in IP flowcharts.

	The **Terminating Symbol** represents the start and end of the process.
	The **Process Symbol** represents any process, function, or action.
	The **Decision Symbol** indicates that decision must be made.
	The **Document Symbol** is used to represent any type of hard copy input or output. Use anytime the procedure calls for the generation of a Record.
	The **Connector Symbol** represents the exit to, or entry from, another part of the same flowchart.
	**Off page Connector Symbol** is used to indicate the flowchart continues on another page.
	**Connectors** are used (not Arrows) to allow easy re-arrangement of symbols on the finished flowchart.

Flowchart of Controlled Document Process:



Attachment C
Pages 1 of 2

DOE-EMCBC PLAN AND/OR PROGRAM DESCRIPTION FORMAT

1.0 PLAN or PROGRAM DESCRIPTION

Develop a "PLAN or PROGRAM DESCRIPTION" statement that is a comprehensive description of a course of action to be followed to meet stated objectives, DOE Orders and Directives, or government regulations.

2.0 SCOPE (Optional)

Include a statement of purpose establishing the limitations or parameters of the Plan and/or Program Description, what it applies to, that is, receipt of incoming material, excess capital equipment, vendor drawings, etc.

3.0 APPLICABILITY

Determine who shall comply with said plan/program description statement.

4.0 REQUIREMENTS & REFERENCES

4.1 Requirements

Identify and list requirements (drivers) such as DOE, federal, state, and local codes, rules, regulations, and laws, etc., that apply to implementation of the plan/program description. Include document number and title.

4.2 References

Identify and list reference documents that have been mentioned in the plan/program description. Include document number and title.

5.0 DEFINITIONS & ACRONYMS (Optional)

Identify those terms and statements contained in the controlled document that require definition for uniform interpretation and clarity. Include any acronyms or abbreviations that are specific in the document. If this section is not required, then state "Not Applicable".

6.0 RESPONSIBILITIES (Optional)

Identify the managerial position or function (not the name of the individual) responsible for taking action; and where appropriate, groups associated with the responsibility to execute the appropriate implementation requirements contained therein.

7.0 GENERAL INFORMATION or IMPLEMENTATION REQUIREMENTS (Optional)

7.1 General Information – Include supplementary background information associated with the orderly implementation of this plan/program description. This section will NOT always be required; however, where appropriate, this section shall be a normal extension of the plan/program description and may include general responsibilities, for example, that are not specific to a position or group of employees.

7.2 Implementation Requirements – This section may be used when the document identifies specific criteria that must be included in the department's plan/program descriptions to correctly implement the requirements of the plan/program.

8.0 PROCESS – Not utilized for a Plan and/or Program Description.

9.0 FLOWCHART – Not utilized for a Plan and/or Program Description.

Attachment D
Pages 1 of 2

Technical Instruction NAME
Department Name

TI # _____ **Procedure # _____**

Approved by: _____ **Date: _____**
AD for Office of

1. **Purpose:** Develop a "Technical Instruction" statement that is a comprehensive description of a course of action to be followed to meet stated objectives, DOE Orders and Directives, or government regulations.

2. **Applicable:** Determine who shall comply with said Technical Instruction.

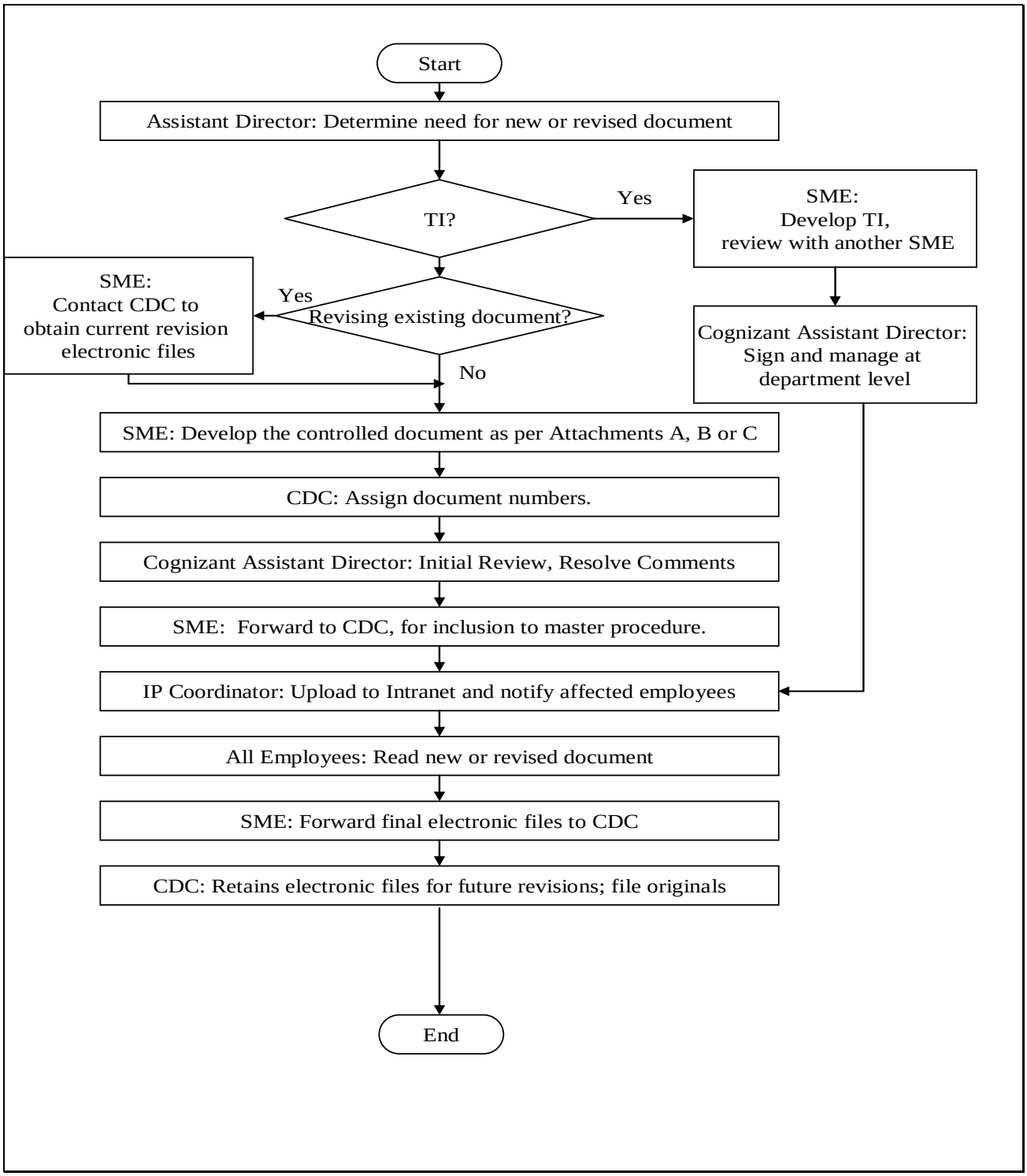
3. **References:** Identify and list reference documents that have been mentioned in the associated procedure. Include document number and title.

4. **Technical Instruction:** This section is an orderly, step-by-step, and logical description of instructions detailing the actions and requirements needed to complete the procedure. Clearly identify the action parties involved and emphasize continuity where performances of sequential actions are necessary to achieve the required results. Do not use names but rather, identify parties by title or position.

5. **Records:** Records generated as a result of implementing this Technical Instruction are identified and maintained by the Office of XXXXX, in accordance with that office's Organizational File Plan.

6. **Flow Charts:** Flow charting of TI's is required. See next page.

Flowchart for Technical Instructions



Attachment E

EMCBC RECORD OF REVISION

DOCUMENT

If there are changes to the controlled document, the revision number increases by one. Indicate changes by one of the following:

- Placing a vertical black line in the margin adjacent to sentence or paragraph that was revised.
- Placing the words GENERAL REVISION at the beginning of the text.

Rev. No.	Description of Changes	Revision on Pages	Date

Attachment F

CONTROLLED DOCUMENT CHANGE REQUEST

DATE: _____

INITIATOR: _____

INITIATOR PHONE NUMBER: _____

DOCUMENT AFFECTED: _____

SECTION: _____ PARAGRAPH #:_____

CONTROLLED DOCUMENT NUMBER : _____ PARAGRAPH #:_____

NEW CONTROLLED DOCUMENT: _____

PROPOSED
REVISION: _____
_____
_____

JUSTIFICATION: _____
_____
_____
_____

Requested by:
_____ DATE: _____

Approval:
_____ DATE: _____
Associate Director

Assigned to: _____ DUE DATE: _____

IP-251-01-F2, Rev. 1

Attachment G

Document Review Record Sheet				
Document Title				
Controlled Document Number	Revision No.	Date Issued for Review		
The subject document is being submitted for your review, approval or comments. Since this review is controlled, a response is required from all reviewers. Therefore, please return the review sheet with or without comments				
To:	Extension:	By:		
Additional Instructions:				
Reviewer	Approve	Approve w/Comments	Do Not Approve	Signature of Reviewer
Comments may be attached to a separate sheet of paper				
APPROVE: Signifies the reviewer's acceptance of the document issued for review.				
APPROVE w/comments: Signifies the reviewer's overall acceptance of the document regarding concept, practice, implementation, provisions and assigned responsibilities. However, the reviewer has suggestions as to the organization of its contents or helpful additions and/or deletions. These comments are termed "non-mandatory comments" and do not require formal resolution between the reviewer and preparer.				
DO NOT APPROVE: Signifies that the reviewer has identified significant problems regarding concept, practice, implementation or responsibilities that render the document unacceptable and/or not in conformance with stated requirements. Such problem areas must be clearly identified by the reviewer. It is mandatory for the preparer to resolve these comments with the reviewer, document the resolution and obtain the reviewers concurrence for the resolution. The reviewer's written concurrence with the resultant change in disposition shall be documented on this form.				
General Review Comments:				
When review is delegated, the designated reviewer shall review and indicate concurrence with the designee's review comments and recommend disposition:				
Designated Reviewer	Concur	Do Not Concur	Signature	Date

IP-251-01-F3, Rev.1

EMCBC RECORD OF REVISION

DOCUMENT

If there are changes to the controlled document, the revision number increases by one. Indicate changes by one of the following:

- Placing a vertical black line in the margin adjacent to sentence or paragraph that was revised.
- Placing the words GENERAL REVISION at the beginning of the text.

Rev. No.	Description of Changes	Revision on Pages	Date
1	Re-write of entire procedure IP-250-01, changed all form numbers, added flow charts and Technical Instructions	All	03/24/08

CONTROLLED DOCUMENT CHANGE REQUEST

DATE: 12/07/07

INITIATOR: T. J. Jackson

INITIATOR PHONE NUMBER: 60077

DOCUMENT AFFECTED: IP-250-01, Rev. 1

SECTION: _____ PARAGRAPH #:_____

CONTROLLED NUMBER : _____ PARAGRAPH #:_____

NEW CONTROLLED NUMBER: IP-251-01, Rev. 2

PROPOSED
REVISION: Rewrite of entire procedure of controlled documents including flowcharting.

JUSTIFICATION: Process improvement team was formed to examine and expand upon the numbering, series, and flowcharting of procedures.

Requested by:
T. J. Jackson DATE: 12/07/07

Approval:
_____ DATE: _____
Associate Director

Assigned to: Lynn Chafin DUE DATE: 02/15/08

IP-251-01-F2, Rev. 1

Document Review Record Sheet				
Document Title	**Preparation, Review, Approval, Revision, and Distribution of EMCBC Controlled Documents**			
Controlled Document Number 251-01	Revision No. 1	Date Issued for Review		
The subject document is being submitted for your review, approval or comments. Since this review is controlled, a response is required from all reviewers. Therefore, please return the review sheet with or without comments				
To: L. Chafin	Extension: 6-0461	By: 03/04/08		
Additional Instructions:				
Reviewer	Approve	Approve w/Comments	Do Not Approve	Signature of Reviewer
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Comments may be attached to a separate sheet of paper				
APPROVE: Signifies the reviewer's acceptance of the document issued for review.				
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General Review Comments:				
When review is delegated, the designated reviewer shall review and indicate concurrence with the designee's review comments and recommend disposition:				
Designated Reviewer	Concur	Do Not Concur	Signature	Date

IP-251-01-F3, Rev.1